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DECLARATION FOR PROVISIONAL, UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		ATTORNEY DOCKET NUMBER	36180/100472
		FIRST NAMED INVENTOR:	Peter Currie
COMPLETE IF KNOWN			
<input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted After Initial Filing surcharge) (37 CFR 1.16(e))	Application Number	10/549,507	
	Filing Date	September 16, 2005	
	Art Unit		
	Examiner Name		

I HEREBY DECLARE THAT:

Each Inventor's residence, mailing address, and citizenship are as stated below next to my name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MODEL FOR MUSCULAR DYSTROPHY AND CARDIOMYOPATHY

(Title of Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY) **September 16, 2005** as United States Application Number or PCT InternationalApplication Number **10/549,507** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)		Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached YES NO
AU 2003901269		March 19, 2003	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
PCT/AU2004/000337		March 18, 2004	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

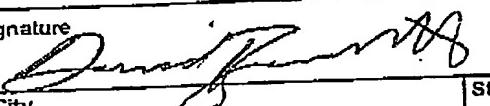
 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> The address associated with Customer	23644	OR <input type="checkbox"/> Correspondence address below
Name _____				
Address _____				
City _____		State _____	ZIP _____	
Country _____	Telephone _____		Fax _____	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Peter		Family Name or Surname Currie		
Inventor's Signature 		Date 5/12/2005		
Residence: City Ashbury		State	Country	Citizenship
Mailing Address 21 Roslyn St.		ZIP 2193	Country AU	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) David JAN		Family Name or Surname Bassett		
Inventor's Signature 		Date 16/1/2006		
Residence: City Edinburgh GATESHEAD		State	Country UK	Citizenship UK
Mailing Address 219 Colinton Mains Dr. 8 TEMPEST STREET, BLAVDON		ZIP NE21 4ND	Country UNITED KINGDOM	
<input type="checkbox"/> Additional inventors or a legal representative are being named on _____		supplemental sheet(s) PTO/SB/02A or 02LR are attached		